PATENT.	APPLI	CAT	ION	FEE	DE.	TEF	MINA'	rion	RECO	RD
				_	_	_				

Application or Docket Number

	Effective October 1, 2000 0972/282									87		
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMAL TYPE	LEI	NTITY	OR	OTHER SMALL	
TOTAL CLAIMS							RATE FEE			1	RATE	FEE
FOR			NUMBER FILED NUM		NUMB	ER EXTRA	BASIC	FEE	355.00	OR	BAȘIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			36 minus 20= 1 6				X\$ 9=			OR	X\$18=	288
INDEPENDENT CLAIMS			3 minus 3 = 7				X40	X40=		OR	X80=	- 50
MULTIPLE DEPENDENT CLAIM PRESENT					+135=		OR	+270=				
* If the difference in column 1 is less than zero, enter "0" in column 2					TOTA	AL		OR	TOTAL	998		
CLAIMS AS AMENDED - PART !!											OTHER	
	e ero aproprietado e rio	(Column 1)	DETERMINATES A	(Colu		(Column 3)	SMA	LL ENTITY		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
S S S	Total	. 39	Minus	··3	<u> </u>	= 3	X\$ 9)=		OR	X\$18=	54.
AME	Independent	· 3	Minus	ENDEN	S CLAIM	= ~	X40	=		OR	X80=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135	=		OR	+270=	
							TO ADDIT. I	TAL		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)									,			
ENT B		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		HATE	ADDI- TIONAL FEE
AMENDMENT	Total	. 43	Minus	3	3.9	= ,4	X\$ 9	=	/	OR	X\$18=	72
AME	Independent	NTATION OF MI	Minus	ENIDENI	3. CLAIM	= 2	X40:	=		OR	X80=	176.00
	FINST PRESE	INTATION OF IM	DETIFIED DEF	LINDEN	OLAM		+135		/ .	OR	+270=	7.1
-							ADDIT. F	EE		OR	TOTAL ADDIT. FEE	248.00
		(Column 1)	Harrison State Company	(Colu		(Column 3)			*.	_		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	•	Minus	**		=	X\$ 9	=		OR	X\$18=	
AME	Independent	•	Minus	***		-	X40=	.		OR	X80=	
+135=								OR	+270=			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE								ì	OR ,	TOTAL ADDIT, FEE		

^{***}If the "Highest Number Previously Paid For" (Notal or Independent) is the highest number found in the appropriate box in column 1.